

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 09/069228	FILING DATE					
CLAIMS						APPLICANT(S)						
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT							
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	
1							51					
2							52					
3							53					
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44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
TOTAL IND.			6		6		TOTAL IND.					
TOTAL DEP.			20		20		TOTAL DEP.					
TOTAL CLAIMS			26		26		TOTAL CLAIMS					

PTO-1246 (3-76)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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